

# EXHIBIT F



## RELIGIOUS ACCOMMODATION REQUEST FORM

### Part 1: To be completed by employee/student

Name: Bailey Korhorn Job title/Student class: 5th year student athlete

Date of request: 8/24/21 WIN or Employee ID Number: 430601105

Immediate supervisor/instructor: Samuel Boateng

Requested accommodation (exemption):  
COVID-19 Vaccine

Length of time the accommodation is needed: May 2022

Describe the religious belief or practice that necessitates this request for accommodation (include additional pages, if needed):

I am a devout Christian and have dedicated my life to God. Everything I do on the soccer field is because of God. He has given me talent and a gift  
and a gift and by playing soccer, I am glorifying Him by using the gift he has given me. God knew me before he created me, therefore I have complete  
confidence that I am a child of the Living God. "For you created my inmost being; you knit me together in my mothers womb," Psalm 139:13. God also  
created us in his own image, "so God created us in his own image, in the image of God he created him; male and female he created them," Genesis  
1:27. Therefore, I trust that God loves me, guides me, and will protect me. I trust the Lord with my life and He is calling me in this way to not go against  
my conscience. (See attached word document for more).

Describe any alternate accommodations that might address your needs:

I will continue to follow campus's safety protocols by practicing social distancing, wearing masks when required, complete my daily health surveys,  
and continue to practice personal hygiene. For the safety of myself and others, I will also continue to get covid tested when needed as a student athlete.

My religious beliefs and practices, which result in this request for a religious accommodation, are sincerely held. I understand that the accommodation requested above may not be granted but that the University will attempt to provide a reasonable accommodation that does not create an undue hardship on the University. I understand that the University may need to obtain supporting documentation regarding my religious practice and beliefs to further evaluate my request for a religious accommodation.

Employee/Student signature: Bailey Korhorn Date: 8/24/21

**Please send completed form to: [oiie-info@wmich.edu](mailto:oiie-info@wmich.edu)**

**Part 2: To be completed by WMU Institutional Equity office:**

Describe the requested accommodation:

**Exemption from Intercollegiate Athletics Vaccine Mandate while participating in Intercollegiate sports.**

Evaluation of impact (if any):

**Campus Safety**

**Athletic Program Safety**

Approved: \_\_\_\_\_ Denied:   X  

If the requested accommodation is denied, what are some alternative accommodations (list in order of preference):

1. Maintain Scholarship for 2021-2022
2. No participation in Intercollegiate Sports
3. Comply with testing and mask mandate

Date discussed with employee/student: **Emailed to student 8/25/2021**

Final accommodation agreed upon:

If no agreement on an accommodation, provide an explanation:

**The University has a compelling interest in taking action to avoid the significant risk posed to the intercollegiate athletic programs of a Covid-19 outbreak due to unvaccinated participants and prohibiting unvaccinated members of the teams from engaging in practices and competition is the only effective manner of accomplishing this compelling interest.**

Institutional Equity representative signature:

*Tammy Miller*

Date: 8/25/21